

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 1/1/17 thru 1/1/20.

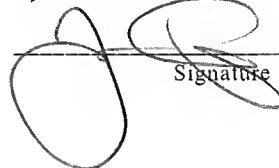
Employer: TOWNSHIP OF MARLBOROUGH

County: MONMOUTH

Date: 2/23/17

Name: JONATHAN CAPP
Print Name

Title: BUSINESS ADMINISTRATION


Signature